## PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2001

**Application or Docket Number** 

10040410

|   |  | CLAIMS AS                                 | FILED -                             | PART                          | 1                            |                                  |     | SMALL ENTITY |                        | OTHER THAN |                     |                        |   |
|---|--|---|-------------------------------------|-------------------------------|------------------------------|----------------------------------|-----|--------------|------------------------|------------|---------------------|------------------------|---|
|   |  |   | (Column 1)                          |                               | (Column 2)                   |                                  |     | TYPE         |                        | OR         | SMALL ENTITY        |                        |   |
| TOTAL CLAIMS  |  |   | 10                                  |                               |                              |                                  |     | RATE         | FEE                    |            | RATE                | FEE                    |   |
| FOR   |  |   | NUMBER FILED                        |                               | NUMBER EXTRA                 |                                  |     | BASIC FEE    | 370.00                 | OR         | BASIC FEE           | 740.00                 |   |
| TOTAL CHARGEABLE CLAIMS   |  |   | / ) minus 20=                       |                               | • 0                          |                                  |     | X\$ 9=       |                        | OR         | X\$18=              |                        |   |
| INDEPENDENT CLAIMS  |  |   | / minus 3 =                         |                               | 0                            |                                  |     | X42=         |                        | OR         | X84=                |                        |   |
| MU  | LTIPLE DEPEN                             | DENT CLAIM P                              | RESENT                              |                               |                              |                                  |     | +140=        |                        | OR         | +280=               |                        |   |
| * If  | the difference                           | in column 1 is                            | less than ze                        | ro, ente                      | "0" in column 2              |                                  | 1.  | TOTAL        | <u> </u>               | OR         | TOTAL               | 740.                   | 6 |
|   | Cl                                       | LAIMS AS A                                | MENDED                              | - PAR                         | T II                         |                                  |     |              |                        | JON        |                     | THER THAN              |   |
|   | •  | (Column 1)                                |                                     | (Colu                         | -                            |                                  |     | SMALL ENTITY |                        |            | OR SMALL ENTIT      |                        |   |
| AMENDMENT A   |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                                     | HIGH<br>NUM<br>PREVIO<br>PAID | BER<br>OUSLY                 | PRESENT<br>EXTRA                 |     | RATE         | ADDI-<br>TIONAL<br>FEE |            | RATE                | ADDI-<br>TIONAL<br>FEE |   |
|   | Total                                    | . 10                                      | Minus                               | **                            | 20                           | =                                |     | X\$ 9=       |                        | OR         | X\$18=              |                        |   |
|   | Independent                              | *   | Minus                               | ***                           | 3                            | <u> </u> =                       |     | X42=         |                        | OR         | X84=                |                        |   |
|   | FIRST PRESE                              | NTATION OF MI                             | JLTIPLE DEF                         | ENDEN                         | CLAIM                        |                                  | J . | +140=        |                        | OR         | +280=               | ·                      |   |
|   |  |   |                                     |                               |                              |                                  | l   | TOTAL        |                        |            | TOTAL               |                        |   |
|   |  |   |                                     |                               | -                            |                                  |     | ADDIT. FEE   |                        | OR         | ADDIT. FEE          |                        |   |
| AMENDMENT B   |  | (Column 1)<br>CLAIMS                      |                                     | (Colu                         |                              | (Column 3)                       | ۱,  |              |                        | 1          | r                   |                        | ĺ |
|   |  | REMAINING<br>AFTER<br>AMENDMENT           |                                     |                               | IBER<br>OUSLY                | PRESENT<br>EXTRA                 |     | RATE         | ADDI-<br>TIONAL<br>FEE |            | RATE                | ADDI-<br>TIONAL<br>FEE |   |
|   | Total                                    | •   | Minus                               | **                            |                              | =                                |     | X\$ 9=       |                        | OR         | X\$18=              |                        | ŀ |
|   | Independent                              | *   | Minus                               | ***                           |                              | =                                | 11  | X42=         |                        |            | X84=                |                        |   |
| ┖   | FIRST PRESE                              | NTATION OF MI                             | JLTIPLE DEF                         | ENDEN                         | CLAIM                        | CLAIM                            |     | 7.42-        |                        | OR         | 7042                |                        |   |
|   |  |   |                                     |                               |                              |                                  |     | +140=        |                        | OR         | +280=               |                        |   |
|   | • •                                      |   | TOTAL<br>ADDIT. FEE                 |                               | OR                           | TOTAL<br>ADDIT. FEE              |     |              |                        |            |                     |                        |   |
| (Column 1) (Column 2) (Column 3)  |  |   |                                     |                               |                              |                                  |     |              |                        |            |                     |                        |   |
| AMENDMENT C   |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                                     | NUM<br>PREVI                  | HEST<br>IBER<br>OUSLY<br>FOR | PRESENT<br>EXTRA                 |     | RATE         | ADDI-<br>TIONAL<br>FEE |            | RATE                | ADDI-<br>TIONAL<br>FEE |   |
|   | Total                                    |   | Minus                               | **                            |                              | =                                |     | X\$ 9=       |                        | OR         | X\$18=              |                        |   |
| ME  | Independent                              | *   | Minus                               | ***                           |                              | =-                               |     | X42=         |                        |            | X84=                |                        |   |
| ╚   | FIRST PRESENTATION OF MULTIPLE DEPENDENT |   |                                     |                               |                              |                                  | ]   |              |                        | OR         |                     |                        |   |
| +140=   |  |   |                                     |                               |                              |                                  |     |              |                        | OR         | +280=               |                        |   |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." |  |   |                                     |                               |                              |                                  |     |              |                        | OR         | TOTAL<br>ADDIT. FEE |                        |   |
| ***   | 'If the "Highest Nu<br>The "Highest Num  | mber Previously P<br>nber Previously Pa   | aid For" IN THI<br>id For" (Total o | S SPACE<br>r Independ         | is less tha<br>lent) is the  | in 3, enter "3."<br>highest numb |     |              | propriate bo           | x in co    | -                   |                        |   |
|   |  |   |                                     |                               |                              |                                  |     |              |                        |            |                     | •                      | 1 |